

1121 N. Lake Park Blvd. Carolina Beach, NC 28428 permits@carolinabeach.org Phone (910) 458-2999 Permit # (Z21-04

TOWN OF CAROLINA BEACH

Conditional Zoning Application

The Conditional Zoning process for the Town of Carolina Beach may be found in the ordinance (Sec. 40-527).

Prior to the application submission, the applicant must conduct a Public Input Meeting. The following are the public meeting requirements:

- The applicant must mail notice of said meeting to all property owners within 500 feet of the perimeter of the project bounds no less than 10 days prior to the meeting.
- The notice must include time, date, location, and project description.
- The applicant must maintain and submit to with their application a:
 - A copy of the letter announcing the meeting
 - A list of property owners contacted
 - An attendance roster from the meeting
 - A summary of the issues discussed
 - The results and any changes related to the proposal based on meeting discussions

Each application submitted to staff must be legible, contain the public scoping meeting required information, and provide all other required materials to be accepted as a completed application. Supplemental application materials may include, but not be limited to, site plans, building designs, engineered drawings, stormwater designs, landscaping plans, project narratives, Federal and/or State permits/permissions, and Traffic Impact Analyses. It is strongly suggested that the applicant set up a meeting with Planning Staff prior to the submission deadline, to ensure the application is complete.

The Planning Department, Technical Review Committee, Planning and Zoning Commission and/or Town Council reserve the right to require additional information if needed to assure that the use in its proposed location will meet be developed in accordance with the Code of Ordinances of the Town of Carolina Beach.

Application fees. The owner or owners, or their duly authorized agent, of the property included in the application for Conditional Zoning shall submit a complete application and supplemental information to the Planning Department. A fee in accordance with the Town's adopted schedule of fees, payable to the Town of Carolina Beach, must accompany each application. For the purposes of determining the fee, the Zoning Administrator shall categorize each such Conditional Zoning Permit Application as either "major" or "minor", depending upon the complexity of review. Generally, Planned Residential (over 3 units), Mixed Uses, Business Developments, and similarly complex projects shall be categorized as "major", while projects such as bed and breakfast inns, small day care services, etc. shall be categorized as "minor".

Major Conditional Zoning Permit = \$800.00 Minor Conditional Zoning Permit = \$350.00

This permit will be scheduled for the next possible Technical Review Committee, provided the public scoping meeting has taken place and the application is otherwise complete.

Please complete all sections of the application.

A. Property Information	\
Address(es): 905 BASIN ROAD	
PIN(s):	
Project Name BASIN ROAD	Tourhones
Size of lot(s):	
B. Application for Conditional Zoning Application is hereby made for a Conditional Use Permit for use of to the use):	the property described above as a (please provide a brief description
C. Applicant Contact Information	D. Owner Contact Information (if different)
Laurel Companies LLC Company/corporate Name (if applicable):	Bonnie Byrd
Applicant's Name	Owner's Name 405 Marina St. Mailing Address
Mailing Address	City, State, and Zip Code 2842
W. Imagran, NC 28409 City, State, and Zip Code	843 - 378 - 7977 Telephone
910 - 632 - 3765 Telephone	<u>bonnie @bbirdne-com</u>
timelaurelcompailes com	

\checkmark	Check the box beside each item verifying that the item has been submitted with this application

I. Site Plan Criteria

For new construction all boxes in this section shall be marked yes by	y the applicant to be considered a complete
application.	

Yes	No	N/	<u>A</u>		
Ø			The na	ame, address, and phone number of the professional(s) responsible for preparing the plan if	
			differe	ent than the applicant.	
			An ap	propriate scaled plan	
			☐ Title block or brief description of project including all proposed uses		
			Date		
				arrow	
				erty and zoning boundaries	
			The square footage of the site		
				verage (buildings, decks, steps)	
				on of all existing and proposed structures and the setbacks from property lines of all affected	
_	_	_		tures to remain on-site	
		П		n of driveways and parking	
				ent right-of-ways labeled with the street name and right of way width	
ш	ш		LUCALI	on of all existing and/or proposed easements	
۸ ما ما		~! :	f	tion on data as data as in all accessors by town staff and for ather reviewing against including	
				tion or data as determined necessary by town staff and/or other reviewing agencies including	
but				he following may be required:	
			N/A		
				Location and design of refuse facilities	
				Approximate locations and sizes of all existing and proposed utilities	
			-	Existing and/or proposed fire hydrants (showing distances)	
				Adjacent properties with owners' information and approximate location of structures	
	Ø			Distances between all buildings	
				Number of stories and height of all structures	
				Locations of all entrances and exits to all structures	
				Calculate the gross floor area with each room labeled (i.e. kitchen, bedroom, bathroom)	
				Exterior lighting locations with area of illumination illustrated as well as the type of fixtures	
				and shielding to be use	
	1			Location of flood zones and finished floor elevations	
				CAMA Areas of Environmental Concern (AEC) and CAMA setbacks	
			M	Delineation of natural features and wetlands with existing and proposed topography with	
				a maximum of two-foot contour intervals	
	×			Proposed landscaping including percentages of open space	
	34			Stormwater management systems	
				Cross-sectional details of all streets, roads, ditches, and parking lot improvements	
	-			Building construction and occupancy type(s) per the building code	
				Location of fire department connection(s) for standpipes	
	×			Turning radii, turnarounds, access grades, height of overhead obstructions	
			M	Dimensions and locations of all signs	
	Ø			A vicinity map drawn with north indicated	
	I ha	ve r	rovide	ed two hard-copies and one scaled electronic version of each required drawing	
				to pay the application fee today	

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SUPPLEMENTAL INFORMATION REQUIRED WITH THE APPLICATION

- 1. Detailed project narrative describing the proposed site and request.
- 2. Agent form if the applicant is not the property owner
- 3. Request for site specific vesting plan shall be submitted in accordance with Chapter 40 Article XIII

OWNER'S SIGNATURE: In filing this application for a conditional zoning, I/we as the property owner(s), hereby certify that all of the information presented in this application is accurate to the best of my knowledge, information and belief.

Signature

Date

AUTHORITY FOR APPOINTMENT OF PERSON TO ACT ON MY BEHALF

The undersigned owner, Bonne Bonne Holder does hereby appoint to act on my behalf for the purpose of petitioning
Tim Banker
the Town of Carolina Beach for: a) an amendment to the text regulations; b) a change to the zoning
map; and/or c) street closing, as applicable to the property described in the attached petition. The
owner does hereby covenant and agree with the Town of Carolina Beach that said person has the
authority to do the following acts for and on behalf of the owner: (1) To submit a proper petition and
the required supplemental reaterials: (2) To appear at public meetings to give testimony and make
commitments on behalf of the owner; and (3) In the case of conditional zoning, to accept conditions
or recommendations made for the conditional zoning on the owner's property. (4) To act on the
owner's behalf without limitations with regard to any and all things directly or indirectly connected
with or arising out of any petition. This appointment agreement shall continue in effect until final
disposition of the petition submitted in conjunction with this appointment.
Date: 8-30-21
Appointee's Name, Address & Telephone:
Tim Barleen
101 Seauseu 120
W.lm.~5700, NC 28409
Signature of Owner: